Appendix H

Asbestos Remediation Waste Profiles, Waste Characterization, and Waste Manifests



| Requested Facility: Chaffee Landfill | | ☐ Unsure Profile Number: | | | | | | | | |
|---|--|--|-------------------------------|---|--|--|--|--|--|--|
| ☐ Check if there are multiple generator locations. At | tach locations. | ☐ Renewal? Original Profile Number: | | | | | | | | |
| A. GENERATOR INFORMATION (MATERIAL ORIGIN) | | B. BILLING INFORMATION U.SAM | IE AS GENI | ERATOR | | | | | | |
| 1. Generator Name: Army Corps of Enginneers | | 1. Billing Name: Allied Environmental Services of NY | | | | | | | | |
| 0.00 4.11 004 14216 1.17 0.1 | | 2. Billing Address: 19 Ransier Drive | | | | | | | | |
| (City, State, ZIP) East Aurora, NY 14052 | | (City, State, ZIP) West Seneca, NY 14224 | | | | | | | | |
| 3. County: Erie | ** - X ******** | 3. Contact Name: Brian Hutzler | | Augmannimicanop | | | | | | |
| 4. Contact Name: Mark Lovejoy | | 4. Email: brian@alliedesi.com | | | | | | | | |
| 5. Email: MLovejoy@TantaraCorp.com | | 5. Phone: 1 (716) 675-4570 6. Fax: 1 (716) 67 | 75-4620 | | | | | | | |
| 6. Phone: 1(508)752-5599 7. Fax: | | 7. WM Hauled? | 2 Yes | | | | | | | |
| 8. Generator EPA ID: | | 8. P.O. Number: NY18-177 | , 9000 15 CO 25 | | | | | | | |
| 9. State ID: | | C. I.C. Nariocki, <u>III. I</u> | | *************************************** | | | | | | |
| C. MATERIAL INFORMATION | and the second s | D. REGULATORY INFORMATION | | | | | | | | |
| 1. Common Name: Friable Asbestos | <u> </u> | 1 EPA Hazardous Waste? | ☐ Yes* | ⊠ No | | | | | | |
| Describe Process Generating Material: | ☐ See Attached | Code: | | | | | | | | |
| Asbestos Abatement in 5 underground abando | oned Missile | 2. State Hazardous Waste? | □ Yes | M No | | | | | | |
| Silos | orica missie | Code: | | | | | | | | |
| | | 3. Excluded waste under 40 CFR 261.4 (a) or (b)? | ☐ Yes* | DZ No. | | | | | | |
| | | 4. Contains Underlying Hazardous Constituents? | ☐ Yes* | | | | | | | |
| Material Composition and Contaminants: | ☐ See Attached | 5. Contains benzene and subject to Benzene NESHAP? | | | | | | | | |
| 1. TSI-Pipe Insulation | 100% | 6. Facility remediation subject to 40 CFR 63 GGGGG? | | | | | | | | |
| 2. | | 7. CERCLA or State-mandated clean-up? | U Yes* | | | | | | | |
| 3. | | 8. NRC or State-regulated radioactive or NORM waste? | | | | | | | | |
| 4. | | | | | | | | | | |
| | ≥100% | *If Yes, see Addendum (page 2) for additional questi | ions and | space. | | | | | | |
| 3. State Waste Codes: | 2 N/A | 9. Contains PCBs? → If Yes, answer a, b and c. | ☐ Yes | ₩ No | | | | | | |
| 4. Color: Brown | | a. Regulated by 40 CFR 761? | ☐ Yes | ∡ No | | | | | | |
| 5. Physical State at 70°F: 🗹 Solid 🚨 Liquid 🚨 O | | b. Remediation under 40 CFR 761.61 (a)? | ☐ Yes | M No | | | | | | |
| 6. Free Liquid Range Percentage:to | | c. Were PCB imported into the US? | ☐ Yes | M No | | | | | | |
| 7. pH:to | | 10. Regulated and/or Untreated | ☐ Yes | DA NO | | | | | | |
| 8. Strong Odor: | | Medical/Infectious Waste? | | | | | | | | |
| 9. Flash Point: □ <140°F □ 140°-199°F □ ≥20 | O° 🗹 N/A (Solid) | 11. Contains Asbestos? Yes: Friable Yes: Non | -Friable | ☐ No | | | | | | |
| E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMAT | ION | F. SHIPPING AND DOT INFORMATION | | | | | | | | |
| 1. Analytical attached | ☑ Yes | 1. 🗖 One-Time Event 🔲 Repeat Event/Ongoing Busin | iess | | | | | | | |
| Please identify applicable samples and/or lab repor | ts: | Estimated Quantity/Unit of Measure: 80 Estimated | | | | | | | | |
| AmeriSci Job# 118051148 | | ☐ Tons ☑ Yards ☐ Drums ☐ Gallons ☐ Other: | | | | | | | | |
| Samples 03 & 06 Silo #2 | ľ | 3. Container Type and Size: 40 yrd. Closed rolloff container | | | | | | | | |
| Silos 1,3,4 & 5 considered Homogeneous Mat | erial | 4. USDOT Proper Shipping Name: | | | | | | | | |
| 2. Other information attached (such as MSDS)? | Q Yes | 사용 그는 | | | | | | | | |
| all relevant information necessary for proper material characterizer from a sample that is representative as defined in 40 CFR 261 - in the process or new analytical) will be identified by the Generator I have Generator that information contained in this Profile is acc | ion submitted in this and ation and to identify know Appendix 1 or by using a or and be disclosed to Wi confirmed with the | all attached documents contain true and accurate descriptions of this rewn and suspected hazards has been provided. Any analytical data affair in equivalent method. All changes occurring in the character of the materials to Waste Management prior to providing the material to Waste Management. Certification Signature | ched was di tenal (i.e., c | erived | | | | | | |
| THINK GREEN: | STIONS? CALL 800 96 | East Rev 53 4776 FOR ASSISTANCE ©2012 Waste | zised June 6 Manageme | | | | | | | |

AmeriSci Job #: 118051148

Client Name: Sienna Environmental Technologies, LLC

Table I Summary of Bulk Asbestos Analysis Results

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| AmeriSci Sample # | Client Semple# | HG | Sample Weight (gram) | Heat Sensitive Organic % | Acid Solubie Inorganic % | Insoluble Non-Asbestos Inorganic % | ** Asbestos % by Bi Mrc | ** Asbestos % by |
|----------------------|---|-----|----------------------------|--------------------------------|--------------------------------|--|-------------------------|------------------|
| | 050118-3239-200-1 | 200 | 0.223 | 14.1 | 30.6 | 56.4 | FLM/US | TEM |
| ÷, | Location: 1'x1' Celling Tile - Drilled Dot; 102 | 02 | | • | | - 26 | NAD | NAD |
| | 050118-3239-200-2 | 200 | 0.390 | 56.6 | 15.1 | 28.2 | | |
| × | Location: 1'x1' Ceiling Tile - Drilled Dot; 102 | 02 | | | | 4:04 | OAN | NAD |
| | 050118-3239-400-1 | 400 | ***** | 1 | | | | |
| රි | Comugated Pipe Insulation; 100 | | | | | I | Chrysottle 50.0 | ¥ |
| | 050118-3239-400-2 | 400 | *** | 1 | - | | | |
| ŭ | Location: Corrugated Pipe Insulation; 100 | | | | | I | NAVES | ž |
| | 050118-3239-400-3 | 400 | 1 | 1 | - | | | |
| 3 | Location: Corrugated Pipe Insulation; 100 | | | | | I | NAVPS | ¥2 |
| | 050118-3239-401-1 | 401 | 1 | | | | | |
| 2 | Location: Mudded Pipe Fittings; 100 | | | | | | Chrysotile 1.5 | NA |
| | 050118-3239-401-2 | 401 |)ı | | | | | |
| Ž | Location: Mudded Pipe Fittings; 100 | | | | | | NA/PS | NA |
| | 050118-3239-401-3 | 401 | I | ı | | | ! | |
| 3 | Mudded Pipe Fittings; 100 | | | | | anten | NA/PS | NA |
| | 050118-3239-600-1 | 900 | - | I | ļ | | i | |
| Ö | Cementitious Peg Board; 101 | | | | | i | Chrysottie 7.5 | NA |
| | 050118-3239-600-2 | 900 | 1 | ı | | | | |
| 8 | Cementitious Peg Board; 101 | | | | | • | NAMPS | NA |
| | 050118-3239-601-1 | 601 | 0.213 | 70.6 | 8.7 | 7 00 | | |
| 3 | Cable Wrap Insulation; 100 | | | | ŝ | 1.77 | NAD | NAD |
| | 050118-3239-601-2 | 109 | 0.159 | 80.8 | 18.4 | 9 | | |
| 3 | Cable Wrap Insulation; 100 | | | | | 6.0 | NAD | NAD |
| | 050118-3239-602-1 | 602 | 0.115 | 34.0 | 24 R | 47.7 | | |
| Ē | Location: Wire Insulation; S-1 | | | | 2 | 7.11 | Chrysottle 23.7 | ¥ |
| | 050118-3239-602-2 | 802 | 0.209 | 30.0 | 23.5 | AR K | | |
| 5 | Location: Wire Insulation; S-1 | | |)) | 2 | 0.04 | NAPS | ¥ |
| | 050118-3239-603-1 | 603 | 0.241 | 30.6 | 3.4 | 65.0 | 4 | į |
| 9 | Location: Vibration Dampner; 100 | | | † - | š | 53 | NAD | NAD |
| | 050118-3239-603-2 | 603 | 0.217 | 31.4 | 40 | 9 7 9 | | |
| ₽ | Location: Vibration Dampner; 100 | | | | ? | 0. | NAD | NAD |
| | | | | | | | | |

See Reporting notes on last page

AmeriSci Job #: 118051148

Client Name: Sienna Environmental Technologies, LLC

Summary of Bulk Asbestos Analysis Results Table I

3239; Tantara Corporation/Mark Lovejoy; Nike Missile Silo #2/601 Willardshire Road, East Aurora, NY

| ** Asbestos % by | IEM | Š | | ¥ Z | | NAD | | NAD | | NAD | | NAD | |
|------------------------------------|-------------------|--------------------------------------|-------------------|--------------------------------------|-------------------|----------------------------------|-------------------|----------------------------------|-------------------|--|-------------------|--|--|
| ** Asbestos % by ** A | LMIDS | Chrysotile 1.6 | | NAMES | | NAD | | NAD | 4 | NAD | | NAD | |
| Insoluble Non-Asbestos Inordanic % | | 6.2 | 22 | 0.3 | | Q. | c | 2 | C | 0. | 9 | 9.6 | |
| Acid Soluble Inorganic % | 2 | ŧ. | 6.7 | š | 7.8 | 2 | 7.8 | 2 | 1 | 3 | 88 | 3 | |
| Heat Sensitive Organic % | BA B | 3 | 80.7 | | 88.2 | ! | 88.9 | | 87.6 | | 86.4 | | |
| Sample Weight (gram) | 0 114 | | 0.180 | | 0.205 | | 0.312 | | 0.221 | | 0.182 | | |
| Area | 804 | • | 604 | | 209 | | 607 | | 809 | ulk; E-1 | 608 ulk; E-1 | | |
| Client Sample# | 050118-3239-604-1 | Location: Expansion Joint Caulk; S-1 | 050118-3239-604-2 | Location: Expansion Joint Caulk; S-1 | 050118-3239-607-1 | Location: Blast Door Gasket; 101 | 050118-3239-607-2 | Location: Blast Door Gasket; 101 | 050118-3239-608-1 | Location: Blast Pad Expansion Joint Caulk; E-1 | 050118-3239-608-2 | Location: Blast Pad Expansion Joint Caulk; E-1 | |
| AmeriSci Sample # | 17 | Location: | 18 | Location: | 19 | Location: | 20 | Location: | 21 | Location: | 22 | Location: | |

Date Reviewed: 5/6/2018 Date Analyzed: 5/6/2018 Reviewed By: TEM Analyzed By: Beverly A. Schrage

Semi-Quantitative Analysis: NAD = no asbestos detected; NA = not analyzed; NA/PS = not analyzed due to positive stop; Trace = <1%;
PLM analysis by EPA 600/R-93/116 per 40 CFR 763 (NVLAP Lab Code 101904-0) or NY ELAP 198.1 for New York friable samples which includes quantitation of any vermiculite observed (198.6 for NOB TEM prep by EPA 600/R-93/116 Section 2.3 (analysis by Section 2.5, not covered by NVLAP Bulk accreditation); or NY ELAP 198.4 for New York NOB samples (NY ELAP Lab # 10984); samples) or EPA 400 pt ct by EPA 600/M4-82-020 (NY ELAP Lab # 10984);

be representative of non-uniformly dispersed debris, soils or other heterogeneous materials for which a combination PLM/TEM evaluation is recommended: Quantitation for beginning weights of <0.1 grams ** Warning Notes: Consider PLM fiber diameter limitation, only TEM will resolve fibers < 0.25 micrometers in diameter. TEM bulk analysis is representative of the fine grained matrix material and may not



| | ☐ Unsure Profile Number: | | |
|---------------------------------------|--|--|---|
| ach locations. | ☐ Renewal? Original Profile Number: | | |
| | B BULING INFORMATION | E ACCENS | CDATO |
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| | o. F.O. Number NV 10-117 | | |
| | and the same of the same and th | | |
| | D. REGULATORY INFORMATION | | |
| | 1. EPA Hazardous Waste? | ☐ Yes* | Z No |
| ☐ See Attached | Code: | | |
| nd abandoned | 2. State Hazardous Waste? | ☐ Yes | S No |
| | Code: | | |
| | 3. Excluded waste under 40 CFR 261.4 (a) or (b)? | ☐ Yes* | M No |
| | | | |
| ☐ See Attached | | | |
| 50% | | | |
| 48% | | | |
| 2% | | | |
| | and the state of t | | |
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| | | | |
| | | ☐ Yes | ₩ No |
| | | ☐ Yes | Ø No |
| | | | |
| 0° 🗹 N/A (Solid) | 11. Contains Asbestos? | -Friable | ☐ No |
| ion | E SHIPPING AND DOT INFORMATION | | |
| | | acc. | |
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| erial | | | Z N/A |
| m var | The state of the s | | ************************************** |
| | See Attached 50% 48% 2% ≥100% ≥100% ✓ N/A (Solid) | 1. Billing Name: Allied Environmental Services of NY, 2. Billing Address: 19 Ransier Drive (City, State, ZIP) West Seneca, NY 14224 3. Contact Name: Brian Hutzler 4. Email: brian@alliedesi.com 5. Phone: 1 (716) 675-4570 6. Fax: 1 (716) 67 7. WM Hauled? 8. P.O. Number: NY18-177 D. REGULATORY INFORMATION 1. EPA Hazardous Waste? Code: 2. State Hazardous Waste? Code: 3. Excluded waste under 40 CFR 261.4 (a) or (b)? 4. Contains Underlying Hazardous Constituents? 5. Contains benzene and subject to Benzene NESHAP? 6. Facility remediation subject to 40 CFR 63 GGGGG? 7. CERCLA or State-mandated clean-up? 8. NRC or State-regulated radioactive or NORM waste? "If Yes, see Addendum (page 2) for additional questi 9. Contains PCBs? → If Yes, answer a, b and c a. Regulated by 40 CFR 761.61 (a)? c. Were PCB imported into the US? 10. Regulated and/or Untreated Medical/Infectious Waste? 11. Contains Asbestos? □ Yes: Friable ☑ Yes: Non F. SHIPPING AND DOT INFORMATION 1. ☑ One-Time Event □ Repeat Event/Ongoing Busin 2. Estimated Quantity/Unit of Measure: 80 Estimated □ Tons ☑ Yards □ Drums □ Gallons □ Other: 3. Container Type and Size: 30 yrd. Open Topped Roll 4. USDOT Proper Shipping Name: | 1. Billing Name Allied Environmental Services of NY, LLC. 2. Billing Address: 19 Ransier Drive (City, State, ZIP) West Seneca, NY 14224 3. Contact Name: Brian Hutzler 4. Email: brian@alliedesi.com 5. Phone: 1 (716) 675-4570 |

AmeriSci Job #: 118051148

Client Name: Sienna Environmental Technologies, LLC

Table I

Summary of Bulk Asbestos Analysis Results
3239; Tantara Corporation/Mark Lovejoy; Nike Missile Silo #2/601 Willardshire Road, East Aurora, NY

| HG Client Sample# Area 050118-3239-200-1 200 |
|--|
| 200 0.223 |
| 200 0.390 |
| 400 |
| 400 |
| 400 |
| 401 |
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| 401 |
| 009 |
| - 009 |
| 601 0.213 |
| 601 0.159 |
| 602 0.115 |
| 602 0.209 |
| 603 0.241 |
| 603 0.217 |

See Reporting notes on last page

AmeriSci Job #: 118051148

Client Name: Sienna Environmental Technologies, LLC

Table I Summary of Bulk Asbestos Analysis Results

3239; Tantara Corporation/Mark Lovejoy; Nike Missile Silo #2/601 Willardshire Road, East Aurora, NY

| | • | 2 | Sample | Heat | Acid | Insoluble | | |
|----------|--|------|--------|-----------|-------------|-----------------------------|------------------|------------------|
| ၁ | Client Sample# A | Area | (gram) | Organic % | Inorganic % | Non-Aspestos Inorganic % | ** Asbestos % by | ** Asbestos % by |
| 020 | 050118-3239-604-1 | 604 | 0.114 | 86.8 | 5.4 | 8.2 | o b elisamento | |
| Expansic | Location: Expansion Joint Caulk; S-1 | | | | i | 4.5 | Cinysoule 1.6 | ¥ Z |
| 92 | 050118-3239-604-2 | 604 | 0.180 | 80.7 | 6.7 | 12 R | | : |
| Expansic | Location: Expansion Joint Caulk; S-1 | | | | i | 2 | | ¥Z |
| 90 | 050118-3239-607-1 | 209 | 0.205 | 88.2 | 7.8 | 40 | | |
| Blast Do | Location: Blast Door Gasket; 101 | | | | ! | 2 | | NAD |
| 9 | 050118-3239-607-2 6 | 607 | 0.312 | 88.9 | 7.8 | 33 | | |
| Blast Do | Location: Blast Door Gasket; 101 | | | | ? |) | | NAD |
| 98 | 050118-3239-608-1 6 | 909 | 0.221 | 87.6 | 50 | ď | 4 | : |
| Blast Pa | Location: Blast Pad Expansion Joint Caulk; E-1 | Σ | | | } | 9 | | NAD |
| ö | 050118-3239-608-2 6 | 808 | 0.182 | 86.4 | 3.8 | 80 | 4 | |
| Slast Pa | Location: Blast Pad Expansion Joint Caulk; E-1 | Σ | | | } | 2 | | NAD |

Date Reviewed: 5/6/2018 Date Analyzed: 5/6/2018 Reviewed By: TEM Analyzed By: Beverly A. Schrage_

Semi-Quantitative Analysis: NAD = no asbestos detected; NA = not analyzed; NA/PS = not analyzed due to positive stop; Trace = <1%;
PLM analysis by EPA 600/R-93/116 per 40 CFR 763 (NVLAP Lab Code 101904-0) or NY ELAP 198.1 for New York friable samples which includes quantitation of any vermiculite observed (198.6 for NOB samples) or EPA 400 pt ct by EPA 600/M4-82-020 (NY ELAP Lab # 10864);

TEM prep by EPA 600/R-93/116 Section 2.3 (analysis by Section 2.5, not covered by NVLAP Bulk accreditation); or NY ELAP 198.4 for New York NOB samples (NY ELAP Lab # 10984);

be representative of non-uniformly dispersed debris, soils or other heterogeneous materials for which a combination PLM/TEM evaluation is recommended; Quantitation for beginning weights of <0.1 grams ** Waming Notes: Consider PLM fiber diameter limitation, only TEM will resolve fibers < 0.25 micrometers in diameter. TEM bulk analysis is representative of the fine grained matrix material and may not should be considered as qualitative only.



| Requested Facility: Chaffee Landfill | | □ Unsure Profile Number: <u>120</u> | 805NY | |
|---|-------------------------|--|---|------------|
| | A Request Certifica | ate of Disposal 🔲 Renewal? Original Profile Number: | | |
| | | | | |
| A. GENERATOR INFORMATION (MATERIAL ORIGIN) | | | E AS GENE | |
| | | Billing Name: <u>Allied Environmental Services of NY</u>, | | |
| 2. Site Address: 601 Willardshire Road | | 2. Billing Address: 19 Ransier Drive, Suite C | | |
| (City, State, ZIP) East Aurora NY 14052 | | (City, State, ZIP) West Seneca NY 14224 | | |
| 3. County: <u>Erie</u> | | 3. Contact Name:Brian Hutzler | 2000 C/10 C/10 C/10 C/10 C/10 C/10 C/10 C | |
| 4. Contact Name: Mark Lovejoy | | 4. Email: brian@alliedesi.com | | |
| 5. Email: mlovejoy@tantaracorp.com | | 5. Phone: <u>(716) 675-4570</u> 6. Fax: | | |
| 6. Phone: <u>(508) 752-5599</u> 7. Fax: | | 7. WM Hauled? | ☐ Yes | ☑ No |
| 8. Generator EPA ID: | 1 N/A | 8. P.O. Number: <u>NY19-074</u> | | |
| 9. State ID: | 1 N/A | 9. Payment Method: 🗹 Credit Account 🗀 Cash 🗀 | Credit Ca | ard |
| C MATERIAL INFORMATION | | | | |
| C. MATERIAL INFORMATION | | D. REGULATORY INFORMATION | | |
| Common Name: Asbestos-Non-Friable Describe Process Generating Material: | D.C Attacked | 1. EPA Hazardous Waste? | ☐ Yes* | M No |
| Describe Process Generating Material: Demolition/renovation - when dry, cannot be crumbled | - See metachea | Code: | ☐ Yes | DI No |
| reduced to powder by hand pressure. Including gaske | | Code: | u res | 140 |
| coverings and asphalt roofing products (specify in C.2 | | 3. Is this material non-hazardous due to Treatment, | | |
| include clean-up wastes, such as | | Delisting, or an Exclusion? | ☐ Yes* | ☑ No |
| | | 4. Contains Underlying Hazardous Constituents? | ☐ Yes* | Z No |
| Material Composition and Contaminants: | ☐ See Attached | 5. From an industry regulated under Benzene NESHAP? | ☐ Yes* | ☑ No |
| 1. Non-Friable Asbestos (Uncontaminated) | 0-100 % | 6. Facility remediation subject to 40 CFR 63 GGGGG? | ☐ Yes* | |
| 2. | | 7. CERCLA or State-mandated clean-up? | ☐ Yes* | |
| 3. 4. | | 8. NRC or State-regulated radioactive or NORM waste? | ☐ Yes* | ☑ No |
| Total comp. must be equal to or greater than 100% | >1000/ | *If Yes, see Addendum (page 2) for additional questi | ons and | space. |
| 3. State Waste Codes: | | 9. Contains PCBs? → If Yes, answer a, b and c. | ☐ Yes | ☑ No |
| 4. Color: Various | G 11/A | a. Regulated by 40 CFR 761? | ☐ Yes | ☐ No |
| 5. Physical State at 70°F: ☑ Solid ☐ Liquid ☐ Oth | | b. Remediation under 40 CFR 761.61 (a)? | ☐ Yes | ☐ No |
| | | c. Were PCB imported into the US? | Yes | ☐ No |
| 6. Free Liquid Range Percentage:to | | Regulated and/or Untreated | ☐ Yes | Z No |
| 7. pH:to | | Medical/Infectious Waste? | | |
| 8. Strong Odor: Yes M No Describe: | | 11. Contains Asbestos? | ☑ Yes | |
| 9. Flash Point: $\Box < 140^{\circ}F \Box 140^{\circ} - 199^{\circ}F \Box \ge 20^{\circ}$ | 00° Z N/A | → If Yes: 🗹 Non-Friable 🖵 Non-Friable – Regula | ated U | Friable |
| E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATIO | ON | F. SHIPPING AND DOT INFORMATION | | |
| 1. Analytical attached | Yes | 1. ☐ One-Time Event | ess | |
| Please identify applicable samples and/or lab reports | 5. | 2. Estimated Quantity/Unit of Measure: 10 | | |
| AmeriSci Job #118051148 Samples 09, 13 & 17. Para | | ☑ Tons ☐ Yards ☐ Drums ☐ Gallons ☐ Other | | |
| 192421. Sample #192421-01 Expansion Joint Silo #2 | | 3. Container Type and Size: 6 mil poly Bags (doubled) | | |
| | - | 4. USDOT Proper Shipping Name: | | ☑ N/A |
| Other information attached (such as MSDS)? | ☐ Yes | 4. 03501 Proper Shipping Name. | | ed N/A |
| 2. Other information attached (such as MSDS): | u 163 | | | |
| G. GENERATOR CERTIFICATION (PLEASE READ AND CERTIF | | | | |
| By signing this EZ Profile™ form, I hereby certify that all information | n submitted in this and | I all attached documents contain true and accurate descriptions of this own and suspected hazards has been provided. Any analytical data atta | material, ar | nd that |
| from a sample that is representative as defined in 40 CFR 261 - Ap | opendix 1 or by using a | an equivalent method. All changes occurring in the character of the ma | tned was d terial (i.e., c | :hanges |
| in the process or new analytical) will be identified by the Generator | and be disclosed to W | laste Management prior to providing the material to Waste Managemen | nt. | 3 |
| If I am an agent signing on behalf of the Generator, I have co | onfirmed with the | Certification Signature ——— | | |
| Generator that information contained in this Profile is accur | ate and complete. | | | |
| Name (Print): Mark Lovejoy Dat | e: 6/7/19 | | | |
| Title: Project Mandaer | | 6/1/1/ the 2. | | |
| to all to and a | | 101 the | _ | |
| D. allerar | | | | |
| THINK GREEN. QUEST | TIONS? CALL 800 9 | | sed June 30 Vaste Mana | |



EZ Profile™ Addendum

Profile Number: 120805NY



Only complete this Addendum if prompted by responses on EZ Profile™ (page 1) or to provide additional information. Sections and question numbers correspond to EZ Profile™.

| L2110me . | | | |
|--|--|------------|----------|
| C. MATERIAL INFORMATION | | | |
| Describe Process Generating Material (Continued from page 1): If more space is needed, ple | ease attach a | additional | pages. |
| soils, that are contaminated with nonfriable asbestos. | | | - 3 |
| | | | |
| Material Composition and Contaminants (Continued from page 1): If more space is needed, ple | ease attach a | additional | pages. |
| 5. | | | -1-5 |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| 9. | | | |
| Total composition must be equal to or greater the | han 100% L | ≥100 | 0% |
| D. REGULATORY INFORMATION | | | |
| Only questions with a "Yes" response in Section D on the EZ Profile™ form (page 1) need to be answered he | re | | |
| 1. EPA Hazardous Waste | 1 . | | |
| a. Please list all USEPA listed and characteristic waste code numbers: | | | |
| | | | |
| | | | |
| | | | |
| b. Is the material subject to the Alternative Debris standards (40 CFR 268.45)? | | ☐ Yes | ☐ No |
| c. Is the material subject to the Alternative Soil standards (40 CFR 268.49)? → If Yes, complete question 4. | | ☐ Yes | □ No |
| d. Is the material exempt from Subpart CC Controls (40 CFR 264.1083)? | | ☐ Yes | |
| → If Yes, please check one of the following: | | cs | |
| ☐ Waste meets LDR or treatment exemptions for organics (40 CFR 264.1082(c)(2) or (c)(4)) | | | |
| ☐ Waste contains VOCs that average <500 ppmw (CFR 264.1082(c)(1)) — will require annual update. | | | |
| 2. State Hazardous Waste → Please list all state waste codes: | 5 - M. SIEDROS - 150 (1700 (17 | | |
| 3. For material that is Treated, Delisted, or Excluded → Please indicate the category, below: | | | |
| □ Delisted Hazardous Waste □ Excluded Waste under 40 CFR 261.4 → Specify Exclusion: | | | |
| ☐ Treated Hazardous Waste Debris ☐ Treated Characteristic Hazardous Waste → If checked, complete question | on 4. | | |
| 4. Underlying Hazardous Constituents → Please list all Underlying Hazardous Constituents: | | | |
| | | | |
| | | | |
| | | | |
| 5. Industries regulated under Benzene NESHAP include petroleum refineries, chemical manufacturing plants, coke by-produc | t recovery p | lants, and | TSDFs. |
| a. Are you a TSDF? → If yes, please complete Benzene NESHAP questionnaire. If not, continue. | 100 | ☐ Yes | |
| b. Does this material contain benzene? | | ☐ Yes | ☐ No |
| 1. If yes, what is the flow weighted average concentration? | | | . ppmw |
| c. What is your facility's current total annual benzene quantity in Megagrams? | □ 1-9.99 N | √lg □≥ | :10 Mg |
| d. Is this waste soil from a remediation? | | ☐ Yes | ☐ No |
| 1. If yes, what is the benzene concentration in remediation waste? | | | . ppmw |
| e. Does the waste contain >10% water/moisture? | | Yes | ☐ No |
| f. Has material been treated to remove 99% of the benzene or to achieve <10 ppmw? | | Yes | ☐ No |
| g. Is material exempt from controls in accordance with 40 CFR 61.342? | | Yes | ☐ No |
| → If yes, specify exemption: | | | |
| h. Based on your knowledge of your waste and the BWON regulations, do you believe that this waste stream is subjective. | ect to | - | |
| treatment and control requirements at an off-site TSDF? | | ☐ Yes | |
| 6. 40 CFR 63 GGGGG → Does the material contain <500 ppmw VOHAPs at the point of determination? | • | ☐ Yes | |
| 7. CERCLA or State–Mandated clean up → Please submit the Record of Decision or other documentation with process in the evaluation for proper disposal. A "Determination of Acceptability" may be needed for CERCLA wastes not going to | | | |
| 8. NRC or state regulated radioactive or NORM Waste → Please identify Isotopes and pCi/g: | a CENCLA af | proved to | acility. |
| o, which is state regulated radioactive or workin waste> riease identity isotopes and pci/g | | | |



Analytical Report For

Allied Environmental

For Lab Project ID

192421

Referencing

NY19-074 Tan Tara EA Nike Base

Prepared

Thursday, June 6, 2019

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.



Lab Project ID: 192421

Client: Allied Environmental

Project Reference: NY19-074 Tan Tara EA Nike Base

Sample Identifier: Expansion Joint Silo #2

Lab Sample ID:192421-01Date Sampled:5/29/2019Matrix:SolidDate Received:5/31/2019

PCBs

| <u>Analyte</u> | <u>Result</u> | <u>Units</u> | | Qualifier | Date Analy | zed |
|----------------------|---------------|--------------|---------------|------------------|-------------------|-------|
| PCB-1016 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1221 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1232 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1242 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1248 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1254 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1260 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1262 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| PCB-1268 | < 0.129 | mg/Kg | | | 6/5/2019 | 23:42 |
| <u>Surrogate</u> | Percen | t Recovery | <u>Limits</u> | <u>Outliers</u> | Date Analy | zed |
| Tetrachloro-m-xylene | : | 28.8 | 12.8 - 98.2 | | 6/5/2019 | 23:42 |

Matrix interferences present in samples associated with this analytical batch caused analyte suppression of closing quality control. Results could be biased low.

Method Reference(s): EPA 8082A

EPA 3546

Preparation Date: 6/3/2019

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Analytical Report Appendix

The reported results relate only to the samples as they have been received by the laboratory.

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All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

Low level Volatiles blank reports for soil/solid matrix are based on a nominal 5 gram weight. Sample results and reporting limits are based on actual weight, which may be more or less than 5 grams.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

- "<" = Analyzed for but not detected at or above the quantitation limit.
- "E" = Result has been estimated, calibration limit exceeded.
- "Z" = See case narrative.
- "D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.
- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "I" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
- "NC" = Not calculable. Applicable to RPD if sample or duplicate result is non-detect or estimated (see primary report for data flags). Applicable to MS if sample is greater or equal to ten times the spike added. Applicable to sample surrogates or MS if sample dilution is 10x or higher.
- "*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
- "A" = denotes a parameter for which ELAP does not offer approval as part of their laboratory certification program.
- "F" = denotes a parameter for which Paradigm does not carry certification, the results for which should therefore only be used where ELAP certification is not required, such as personal exposure assessment.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.

GENERAL TERMS AND CONDITIONS LABORATORY SERVICES

These Terms and Conditions embody the whole agreement of the parties in the absence of a signed and executed contract between the Laboratory (LAB) and Client. They shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties. The LAB specifically rejects all additional, inconsistent, or conflicting terms, whether printed or otherwise set forth in any purchase order or other communication from the Client to the LAB. The invalidity or unenforceability in whole or in part of any provision, tern or condition hereof shall not affect in any way the validity or enforceability of the remainder of the Terms and Conditions. No waiver by LAB of any provision, term, or condition hereof or of any breach by or obligation of the Client hereunder shall constitute a waiver of such provision, term, or condition on any other occasion or a waiver of any other breach by or obligation of the Client. This agreement shall be administered and interpreted under the laws of the state which services are procured.

Warranty.

Recognizing that the nature of many samples is unknown and that some may contain potentially hazardous components, LAB warrants only that it will perform testing services, obtain findings, and prepare reports in accordance with generally accepted analytical laboratory principles and practices at the time of performance of services. LAB makes no other warranty, express or implied.

Scope and Compensation. LAB agrees to perform the services described in the chain of custody to which these terms and conditions are attached. Unless the parties agree in writing to the contrary, the duties of LAB shall not be construed to exceed the services specifically described. LAB wi use LAB default method for all tests unless specified otherwise on the Work Order.

Payment terms are net 30 days from the date of invoice. All overdue payments are subject to an interest charge of one and one-half percent (1-1/2%) per month or a portion thereof. Client shall also be responsible for costs of collection, including payment of reasonable attorney fees if such expense is incurred. The prices, unless stated, do not include any sale, use or other taxes. Such taxes will be added to invoice prices when required.

Prices.

Compensation for services performed will be based on the current Lab Analytical Fee Schedule or on quotations agreed to in writing by the parties. Turnaround time based charges are determined from the time of resolution of all work order questions. Testimony, court appearances or data compilation for legal action will be charged separately. Evaluation and reporting of initial screening runs may incur additional fees.

Limitations of Liability.

In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

LAB shall have no liability, obligation, or responsibility of any kind for losses, costs, expenses, or other damages (including but not limited to any special, direct, incidental or consequential damages) with respect to LAB's services or results.

All results provided by LAB are strictly for the use of its clients and LAB is in no way responsible for the use of such results by clients or third parties. All reports should be considered in their entirety, and LAB is not responsible for the separation, detachment, or other use of any portion of these reports. Client may not assign the lab report without the written consent of the LAB. Client covenants and agrees, at its/his/her sole expense, to indemnify, protect, defend, and save harmless the LAB from and against

any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements and/or expenses (including, without limitation attorneys' and experts' fees and disbursements) of any kind whatsoever which may at any time be imposed upon, incurred by or asserted or awarded against client relating to, resulting from or arising out of (a) the breach of this agreement by this client, (b) the negligence of the client in handling, delivering or disclosing any hazardous substance, (c) the violation of the Client of any applicable law, (d) non-compliance by the Client with any

environmental permit or (e) a material misrepresentation in disclosing the materials to be tested.

Hazard Disclosure.

Client represents and warrants that any sample delivered to LAB will be preceded or accompanied by complete written disclosure of the presence of any hazardous substances known or suspected by Client. Client further warrants that any sample containing any hazardous substance that is to be delivered to LAB will be packaged, labeled, transported, and delivered properly and in accordance with applicable laws.

Sample Handling.

Prior to LAB's acceptance of any sample (or after any revocation of acceptance), the entire risk of loss or of damage to such sample remains with Client. Samples are accepted when receipt is acknowledged on chain of custody documentation. In no event will LAB have any responsibility for the action or inaction of any carrier shipping or delivering any sample to or from LAB premises. Client authorizes LAB to proceed with the analysis of samples as received by the laboratory, recognizing that any samples not in compliance with all current DOH-ELAP-NELAP requirements for containers, preservation or holding time will be noted as such on the final report.

Disposal of hazardous waste samples is the responsibility of the Client. If the Client does not wish such samples returned, LAB may add storage and disposal fees to the final invoice. Maximum storage time for samples is 30 days after completion of analysis unless modified by applicable state or federal laws. Client will be required to give the LAB written instructions concerning disposal of these samples.

LAB reserves the absolute right, exercisable at any time, to refuse to receive delivery of, refuse to accept, or revoke acceptance of any sample, which, in the sole judgment of LAB (a) is of unsuitable volume, (b) may be or become unsuitable for or may pose a risk in handling, transport, or processing for any health, safety, environmental or other reason whether or not due to the presence in the sample of any hazardous substance, and whether or not such presence has been disclosed to LAB by Client or (c) if the condition or sample date make the sample unsuitable for analysis.

Legal Responsibility. LAB is solely responsible for performance of this contract, and no affiliated company, director, officer, employee, or agent shall have any legal responsibility hereunder, whether in contract or tort including negligence.

Assignment.

LAB may assign its performance obligations under this contract to other parties, as it deems necessary. LAB shall disclose to Client any assignee (subcontractor) by ELAP ID # on the submitted final report.

Force Majeure.

LAB shall have no responsibility or liability to the Client for any failure or delay in performance by LAB, which results in whole or in part from any cause or circumstance beyond the reasonable control of LAB. Such causes and circumstances shall include, but not limited to, acts of God, acts or orders of any government authority, strikes or other labor disputes, natural disasters, accidents, wars, civil disturbances, difficulties or delays in transportation, mail or delivery services, inability to obtain sufficient services or supplies from LAB's usual suppliers, or any other cause beyond LAB's reasonable control.

Law.

This contract shall be continued under the laws of the State of New York without regard to its conflicts of laws provision.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.

CHAIN OF CUSTODY

| | Other | Rush 1 day | Rush 2 day | Rush 3 day | 10 day | Standard 5 day | Availability contingent upon lab approval; additional fees may apply. | Turnaround Time | | | | | | (- | | | , , , | 5/29/19 1:00PM | DATE COLLECTED COLLECTED | | THE THE | PROJECT REFERENCE | | | | TARADIGM | |
|---|---|------------|------------|------------|-----------------|----------------|---|--------------------|----------------|---|------------|-----|---|--------|------------|---------|-------|----------------|---|--------------------|--|-------------------|-----------|------------------|-----------------|----------------|-------------|
| | Other please indicate package needed: | | Category B | Category A | Batch QC | None Required | ipon lab approvi | R | _ | | | | | | | | | X | M W O D E O C | | SON THE W | 200 | P | CIT | AD | | |
| | | | | | | | al; additional fe | Report Supplements | erese services | | len Egy | 14, | | ta vil | 7 S | は | 2112 | SXPARISIO | | | Matrix Codes: AQ - Aqueous Liquid NQ - Non-Aqueous L | 30HJB | J/C :BNOH | 55 (43 CM) | ADDRESS: 9 PA | CLIENT: ALL S | |
| | Other EDD | | 9. | NYSDEC EDD | Basic EDD | None Required | es may apply. | ements | | 0 | | * | - | | - 1 - 1 | 25 mm V | 042 | Lavor Main | SAMPLE IDENTIFIER | | Codes: AQ - Aqueous Liquid NQ - Non-Aqueous Liquid | PAUSOS | 0154570 | KCHSTATE POSCH | 10518P DP 6 | D | REPORT TO: |
| | (C ced 5/ By signing this for | d@Lab By | | Daywoo | Relinquished by | No. | Sample By | MAN A | | | | | | | | | | 1 95 | X - Z - Z - Z - Z - Z - Z - Z - Z - Z - | | WA - Water WG - Groundwater | 4 MOD'I | PHONE: | ZIP / 4724 CITY: | DITE & ADDRESS: | CLIENT: | |
| | (*C res. $\frac{5}{3}$) $\frac{1}{1}$ $\frac{1}{9}$ $\frac{1}{9}$ $\frac{1}{9}$ S By signing this form, client agrees to Paradigm Terms and Conditions (reverse). | | | Steiner | Dar | | FURNICT! | 1 12ho co 200 . | | | | | | | | | * | < | | REQUESTED ANALYSIS | DW - Drinking Water WW - Wastewater | ETBANN CALIED | | STATE: | 35. | | INVOICE TO: |
| Soo addit | digm Terms and Co | - | 0 | 5/30/19/ | Date/Time | 5/20/19 | 7/17 | | | | | | | | | | | | | SISA | SO - Soil SL - Sludge | MOD, 1633 | | ZIP: | | | 0. |
| See additional page for sample conditions | nditions (reve | | こぶり | 1/13 | 7 | | | 2000 | | | | | | | | | | | REMARKS | | SD - Solid PT - Paint | | Email: | Quotation #: | 19242 | | |
| ron olumns r | rse). | Γ | | 7 | Γ | Cost | | | | | | | | | | | | | | | WP - Wipe CK - Caulk | | | ** | 12 | LAB PROJECT ID | |
| 1: | | _ | | 1 | | | | | | | | | | | | | | 0 | PARADIGM LA SAMPLE NUMBER | | OL - Oil AR - Air | | | | | - | |



Chain of Custody Supplement

| Client: Lab Project ID: | Allied Environmental | Completed by: | 6/21/19 |
|---|--|----------------------------------|---------------------|
| | Sample Condition Per NELAC/ELAP 210/ | Requirements /241/242/243/244 | |
| Condition | NELAC compliance with the sample co Yes | ndition requirements i No | upon receipt N/A |
| Container Type | X | | |
| Comments | | | , N |
| Transferred to method- compliant container | | | |
| Headspace (<1 mL) Comments | | | |
| Preservation Comments | | | × |
| Chlorine Absent (<0.10 ppm per test strip) Comments | | | X |
| H olding Time Comments | | | |
| Temperature Comments | 6'Ciced | | |
| Compliant Sample Quantity, | /Туре | | |
| | | | |

| 5. Generator's Name and Mailing Address | Vail 16606 | 2 Page 1 of 3 E | 900) erator's Site A | 1992-9 | 1/8) | te Tracking | 8-111 |
|---|--|--|--|---|-------------------------------------|-------------|--|
| 5. Generator's Name and Mailing Address APAM CONTROL OF STATE OF | 42-2751 160 | 1 | 601 W | HOLD | DSHIP RA A | E. R. | 0AD 4052 |
| WASTE MAPAGET | 1ENT | | | | U.S. EPA | ID Number | |
| | | | | | U.S. EPA | ID Number | |
| 8. Designated Facility Name and Site Address WASTE MANAGEMEN 10860 OLFAN POA Facility's Phone | JCHATTEE 1 | ANDF | 71L | | U.S. EPA I | D Number | |
| 9. Waste Shipping Name and Description | 10.0) | 10 -1 | | ontainers | 11. Total | 12. Uni | |
| NON FRABLE AGA WM PROFILE # | 45105 | | No. | Туре | Quantity | Wt./Vol. | |
| NON FRABLE ASI WM PROFILE # | 119163NY | | 1 | R.O. | 5 | T | esT. |
| 3. | | | | | | | |
| | | | | | | | |
| 4 | | | | | | | |
| | | | | 1 1 | | | |
| 13. Special Handling Instructions and Additional Information APPROVAC # 11' EMCRGGOOX P4 | 9163NY | 1 | + TL18 | ED# | NYIE | 3-1 | 77 |
| 13. Special Handling Instructions and Additional Information APPENAL H EMCPCONY 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's/Offeror's Printed/Typed Name | 1# 1(800 |)992- | 578 accurately des | Scribed above by onal government | the proper shipp al regulations. | ing name, a | and are classified, packag |
| 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's/Offeror's Printed/Typed Name | that the contents of this consigner condition for transport according to |)992- | 578 accurately des dional and natio | SI scribed above by onal government | the proper shipp al regulations. | ing name, a | and are classified, packag |
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| 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's/Offeror's Printed/Typed Name 15. International Shipments Import to U.S. fransporter Signature (for exports only): 6. Transporter Acknowledgment of Receipt of Materials Fransporter 1 Printed/Typed Name 16. O U. J. | that the contents of this consigner condition for transport according to the c | nment are fully and a to applicable internal Signature Signature Signature | accurately desident and national and nationa | Cribed above by onal government stry/exit: | the proper shipp al regulations. | ing name, a | Month Day Month Day Month Day Full Rejection |
| 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's Offegor's Printed/Typed Name 15. International Shipments Import to U.S. Transporter Signature (for exports only): 16. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name 17. Discrepancy 7. Discrepancy Indication Space Quantity | that the contents of this consigner condition for transport according to the c | nment are fully and a to applicable internal Signature Signature Signature | accurately desident and national and nationa | Cribed above by onal government stry/exit: | the proper shipp al regulations. | ing name, a | Month Day Month Day Month Day Full Rejection |
| 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's/Offeror's Printed/Typed Name 15. International Shipments | Hard I (COT) Clare that the contents of this consigner condition for transport according to the condition for transpor | nment are fully and a to applicable internal Signature Signature Signature Manifest | Port of en Date leavi | Cribed above by onal government stry/exit: | the proper shipp al regulations. | ing name, a | Month Day Month Day Month Day Full Rejection |
| 14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby dec marked and labeled/placarded, and are in all respects in prope Generator's/Offeror's Printed/Typed Name 15. International Shipments Import to U.S. Iransporter Signature (for exports only): 16. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name 17. Discrepancy 18. Discrepancy Indication Space Quantity 19. Alternate Facility (or Generator) | Hard I (COT) Clare that the contents of this consigner condition for transport according to the condition for transpor | nment are fully and a to applicable internal Signature Signature Signature Manifest | Port of en Date leavi | Cribed above by onal government stry/exit: | the proper shipp al regulations. | ing name, a | Month Day Month Day Month Day Full Rejection |

Original Ph: (716) 496-5000 Ticket# 562554

Customer Name WM-CLIROLLOFF WM-CLI ROL Carrier WM WASTE MANAGEMENT Ticket Date 07/26/2018 Vehicle# 415459 -300 Container Driver Route Check# Hauling Ticket# 230559 Billing# 0000001 Grid 4F6-1570 Destination

Manifest NY18-177
Profile 119163NY (NON FRIABLE ASBESTOS)
Generator 190-USARMYCORPSEASTAURORA US ARMY CORPS

Time Scale Operator Inbound Gross 44060 lb 07/26/2018 09:19:20 INBOUND JChapma7 Tare 36740 lb Out 07/26/2018 09:33:04 OUTBOUND JChapma7 Net Tons 7320 lb 3.66

Comments 129145 - ALLIED ENV 601 WILLARDSHIRE 230559

| Pro | oduct | | | 1.0% | Qtv | ***** | - | | | |
|-----|---------|-----|------------------|------|------|-------|------|---------|--------|---------|
| | | | | LUE | QLY | UOM | Rate | Tax/Fee | Amount | Origin |
| 7 | to make | 31 | Pa i an | | | | | | | 4773711 |
| 4 | ASD | Nou | Fri-Tons-Asbesto | 100 | 3.66 | Tons | | | | |
| | | | | | | 40110 | | | | ERI |

Total Tax/Fees Total Ticket

Driver's Signature 4.0



WASTE SHIPMENT RECORD/ASBESTOS MANIFEST

For Disposal Site Use Only (See Reverse for Instructions) 1- A Special Waste Profile Number NESHAP Notified WSR Number 52906 YES North rator Name, Contact Name, and Complete Mailing Address (including Zip Code) 1-C. Generator's Phone Number 1(978)318-8160 1(978)318-8166 1-E 24 Hour Emergency Response Operator's Phone Number WDS Phone Numbe Generator 6. Containers 7. Total Quantity No Type yd3 friable asbestos RQ, NA2212, Asbestos, 9, PGIII non-friable asbestos Cat I Cat II 8. Special Handling Instructions and Additional Information 24 HOUR NOTICE GIVEN PRIOR TO DISPOSAL hereby declare that the co ping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. I hereby certify that the asbestos is not contaminated with hazardous, PCB, and/or any special waste. Printed/Typed Name and Title Signature Date Transporter 1 Company Name Driver Signature Transporter Complete Mailing Address Printed Name and Title Telephone Number (including area code) 12 Discrepancy Indication Space Disposal Site 13 Waste Disposal Site Owner or Operator Certification of receipt of asbestos materials covered by this manifest except as noted in Item 12 Printed/Typed Name and Title Signature

WHITE - Disposal Site

CANARY - Generator To be mailed by Disposal Sitel

PINK - Transponer

GOLD - Generator (To be taken prior to disposal)

Original Ticket# 563360 Ph: (716) 496-5000

Customer Name WM-CLIROLLOFF WM-CLI ROL Carrier WM WASTE MANAGEMENT Ticket Date 08/02/2018 Vehicle# 413331- 40C Payment Type Credit Account Container Manual Ticket# Driver

Driver Check#

Route Hauling Ticket# 234928

Billing# 0000001 Grid

4F6-1570

Destination

Manifest 52906 Profile 119162NY (FRIABLE ASBESTOS)

Generator 190-USARMYCORPSEASTAURORA US ARMY CORPS

PO#

Product

Time Scale In 08/02/2018 08:53:22 INBOUND JChapma7 Out 08/02/2018 09:18:39 OUTBOUND JChapma7

Operator

Inbound Gross Tare Net Tons

40900 lb 37720 lb 3180 lb

1.59

Comments 129145 - ALLIED ENVIRONMENTAL#NY18777 601 WILLARDSHIRE 234928

| FI | oduct | | LD% | Qty | DOM |
|----|-------|----------------------|-----|-------|------|
| | | | | | |
| 1 | Asb | Friable-Tons-Asbesto | 100 | (1.59 | Tons |

Rate Tax/Fee Amount -----

Origin

Tons

Total Tax/Fees Total Ticket

Driver's Signature Man

| WASTE MANIFEST | erator ID Number | 2. Page 1 of | 3. Emergency Res | Plane Phone 57 | 81 4. Was | te Tracking | Number 7 |
|--|---|---|--|---|-------------------------------------|---------------|---|
| Generator's Phone: 1(978) | 7. OF ENGINEER 1104 FOAD-2751 319-8160 | 5, | Generator's Site A 601 Lu EAST 1 | TILLAR | DENTIL | RS P | DAD 057 |
| 6. Transponer 1 Company Name WASTE MA | PAGEHENT | | | | U.S. EPA | ID Number | |
| 7. Transporter 2 Company Name | | | | | U.S. EPA | D Number | |
| 8. Designated Facility Name and Site Add | PAGENENT CHA | THE | LAND | FILE | U.S. EPA I | D Number | |
| 9. Waste Shipping Name and Desc | | | 10. C | ontainers | 11. Total Quantity | 12. Unit | |
| GENERATOR CON L | BLE ASBESTOS LE# 119163 N | S X | 1 | CM | 40 | WL/Vol. | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4. | | | | | | | |
| 1 | | | 1 | | | 1 1 | |
| 13. Special Handling Instructions and Addition | | | [LL[8] | | VY18 | 3-17 | 7 |
| 13. Special Handling Instructions and Addition of the Policy Control of the Policy Contr | CATION: I hereby declare that the contents of this in all respects in proper condition for transport account to U.S. | is consignment are fully coording to applicable int | 578/ and accurately desemational and national | scribed above by onal governmenta | the proper shipp al regulations. | oing name, ar | nd are classified, packaged, |
| 13. Special Handling Instructions and Addition of the Policy Control of the Policy Contr | CATION: I hereby declare that the contents of this in all respects in proper condition for transport accounts of the port to U.S. | is consignment are fully ecording to applicable int | 578/ and accurately des | scribed above by onal governmenta | the proper shipp al regulations. | oing name, ar | nd are classified, packaged, |
| 13. Special Handling Instructions and Addition PP CACA EMCHACO 14. GENERATOR'S/OFFEROR'S CERTIFIC Marked and labeled/placarded, and are in Generator's/Offeror's Printed/Typed Name 15. International Shipments Improper 15. International Shipments Improper 16. Transporter Acknowledgment of Receipt of Transporter 1 Printed/Typed Name Wansporter 2 Printed/Typed Name | CATION: I hereby declare that the contents of this in all respects in proper condition for transport account to U.S. | is consignment are fully coording to applicable int | and accurately desernational and nati | scribed above by onal governmenta | the proper shipp al regulations. | oing name, ar | nd are classified, packaged, |
| 13. Special Handling Instructions and Addition of the Policy Control of the Policy Contr | CATION: I hereby declare that the contents of this in all respects in proper condition for transport account to U.S. | is consignment are fully coording to applicable into Signature Signature Export from U.S. | and accurately desernational and nati | scribed above by onal governmenta | the proper shipp al regulations. | SACE | Month Day |
| 13. Special Handling Instructions and Addition of the Policy Control of the Policy Contr | CATION: I hereby declare that the contents of the nall respects in proper condition for transport accepted to U.S. | is consignment are fully coording to applicable int Signature Export from U.S. Signature | and accurately desernational and national an | scribed above by onal governments on the scribed above by onal governments of the scribed above by onal governments on the scribed above by onal governments of the scribed above by onal governments on the scribed above by onal governments of the scribed above by onal governments of | the proper shipp at regulations. | SACE | Month Day Month Day Month Day Month Day Month Day |
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Original Ticket# 564600

Ph: (716) 496-5000

Customer Name WM-CLIROLLOFF WM-CLI ROL Carrier WM WASTE MANAGEMENT Ticket Date 08/13/2018 Vehicle# 415459 -300 Container Manual Ticket# Driver Driver Route Check# Hauling Ticket# 238771 Billing# 0000001 Grid 4F6-1570 Destination Manifest NY18-177
Profile 119163NY (NON FRIABLE ASBESTOS)
Generator 190-USARMYCORPSEASTAURORA US ARMY CORPS Grid

PO#

Time Scale Operator Inbound Gross 42560 1b Out 08/13/2018 10:03:07 INBOUND JChapma7 Tare 36380 1b Net 6180 1b Time 6180 lb Tons 3.09

Comments 129145 - ALLIED ENV 601 WILLARDSHIRE

| Pro | Product | | | TDS | Qty | UOM | Date | | | |
|-----|---------|-----|------------------|-----|------|------|------|---------|--------|--------|
| | | | | | Ary | OOM | Rate | Tax/Fee | Amount | Origin |
| 1 | Asb | Non | Fri-Tons-Asbesto | 100 | 3 00 | m | | | | |
| | | | TTT TONS ASDESTO | 100 | 3.09 | Tons | | | | ERI |

Total Tax/Fees Total Ticket

Driver's Signature



| | NON-HAZARDOUS WASTE MANIFEST | | r ID Number | | 2. Page 1 of 3. 8 | mergency Resp | Ponse Phone | 91 4. Wast | te Tracking I | Number |
|---|--|--|---|--|--|---|--|-------------------------------------|----------------------|---|
| Gen | nerator's Phone: (C | 779)3 | | NEEFF 2-2751 | Gen | erator's Site Ad | ILLA | nt than mailing ac | DCP | DAD 4052 |
| 6. Tr | ransporter 1 Company N | A MAX | PAGEME | DT | + | | | | ID Number | |
| 7. Tr | ransporter 2 Company N | lame | | | | | | U.S. EPA | ID Number | |
| 8. De | esignated Facility Name | and Site Address | EMENT | CHATTEE | LAPOF | ill | | U.S. EPA I | D Number | |
| Facili | CHAFF lity's Phone: 127 | 62 496 | 4 1483 2-5192 | D | | | * | 1 | | |
| | 9. Waste Shipping Nar | | | | | 10. Co No. | ntainers Type | 11. Total Quantity | 12. Unit Wt./Vol. | |
| HOLI | NON FR | ABLE | ASBES | 185 | e proposed in | 1 | CM | 150 | 1. | |
| GENERATOR | 2. | offle: | # 11916 | 13 NY | | 1 | UT | EST | YRD | |
| | 3. | | | | | | | | | |
| | | | | | | | | | | , |
| | 4. | | | | | | | | | |
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| 10. оре | APPROVA | 16# | 11916 | | | A | CUE | D#1 |)Y18 | 3-177 |
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Original Ticket# 566322 Ph: (716) 496-5000

Customer Name WM-CLIROLLOFF WM-CLI ROL Carrier WM WASTE MANAGEMENT Ticket Date 08/27/2018 Vehicle# 415510 -300 Ticket Date 08/27/2018
Payment Type Credit Account

Manual Ticket#

Driver

Container

Route Hauling Ticket# 241480 Destination

Check# Billing# 0000001 Grid

4F6-1570

Manifest NY18-177

Profile 1.19163NY (NON FRIABLE ASBESTOS)
Generator 190-USARMYCORPSEASTAURORA US ARMY CORPS

PO#

Scale In 08/27/2018 07:16:57 INBOUND Out 08/27/2018 07:35:14 OUTBOUND

Operator JChapma7 JChapma7

Inbound , Gross

Tare Net

Tons

38120 lb .36380 lb 1740 lb

6.

0.87

Comments 129145 - ALLIED ENVIRO 601 WILLARDSHIRE

241480

Product

Qty_ UOM

Rate Tax/Fee Amount

Origin

1 Asb Non Fri-Tons-Asbesto 100

0.87 Tons

Total Tax/Fees Total Ticket

Driver's Signature

LD%

| † | NON-HAZARDOUS WASTE MANIFEST | Generator ID Number | | | ergency Respons | | | Tracking Nur | o 74 | |
|---------------------|--|---|------------------------------------|---|--|-------------------------------------|-----------------------|----------------------|----------------------------|------------|
| 1000 | | INGADDRESS OF ENGIL | JEGR5 | Gener | ator's Site Addres | s (if different t | han mailing add | ress) | | |
| | 696 VPCI CONCOPD Generator's Phone: | MA 20AD MA 20AD MA 0174Z 8)318-8160 | -2751 | S | STAC | LOF | A;N) | 1 14 | 052 | |
| | Generator's Phone: 6. Transporter 1 Company Nam | NVIPONHENTA | 9LSERVICE | SOFN | I, uc | 2 | U.S. EPA II | Alumber 9 | 20 | |
| | 7. Transporter 2 Company Nan | | • | | | | U.S. EPA ID | Number | | |
| 20 St. Oct. | 8. Designated Facility Name and Company of the Comp | 104724ENT LEAN POAN 140 | CHATEE 30 | LANDI | -uk- | | U.S. EPA IE |) Number | | |
| | 9. Waste Shipping Name | e and Description | | | 10. Cont | ainers Type | 11. Total Quantity | 12. Unit Wt./Vol. | | |
| GENERATOR - | NON-F WMPP | PABLE ASP DFILE#12 | 10805N) | y | 19 | BA | Ftow ! | st | | |
| - GEN | 2. | | | | | | | | | |
| | 3. | 4 | | | | | | | | |
| | 4. | | 2: | | | | | | | |
| | EMERI 14. GENERATOR'S/OFFEROI | as and Additional Information ACH 120 ACH 120 | elare that the contents of this of | consignment are fully a ording to applicable inte | 2-57 Ind accurately designational and national | 81 scribed above onal governm | by the proper sh | nipping name, | and are classified, packag | |
| ¥ | James VI | 1501 | | 1/ | ELV | a | | | 07/16 | 19 |
| INT | International Shipments Transporter Signature (for expo | Import to U.S. orts only): | | Export from U.S. | Port of e | ntry/exit: ving U.S.: | | | | |
| TER | 16. Transporter Acknowledgme Transporter 1 Printed/Typed Na | ent of Receipt of Materials | .) | Signature | 1 | | 01 | | Month Daff | Year |
| TRANSPORTER | Transporter 2 Printed/Typed Na | meculi | 10116H | Signature | uh p | U C | uff | • | Month Day | Year |
| 1 | 17. Discrepancy 17a. Discrepancy Indication Sp | ace 🗆 | | ' | | | | | | |
| | Tra. Distribution of | Quantity | Туре | | Residue | | Partial R | ejection | Full Reje | ction |
| 7 | 17b. Alternate Facility (or Gene | erator) | | Ma | nifest Reference | Number: | U.S. EPA II |) Number | | |
| FACILITY | Facility's Phone: | | | | | | Ĭ | | | |
| DESIGNATED F | 17c. Signature of Alternate Fac | ility (or Generator) | | | | | | | Month Day | Year |
| - DESIG | | | | | Barrarana Rassarrana Rassarrana | | | | | |
| | | or Operator: Certification of receipt | of materials covered by the n | | d in Item 1 | Stebstaneed | la Leonarda de | 6 | 1873 | |
| + | Printed/Typed Name | New | Ma - | Signature | (Th | | | | Month Day | Year 19 |
| 169 | 9-BLS-C 5 11979 (Rev. | 9/09) | • | | \bigcirc | D | ESIGNAT | ED FAC | ILITY TO GENE | RATOR |

Chaffee Landfill Reprint Ticket# 601823 10860 OLEAN RD,

CHAFFEE, NY, 14030-9768 Ph: (716) 496-5514

Customer Name ALLIEDENVIROSERVICESOFNY Carrier ALLIED ENVIRONMENTAL ALLIED ENVIRONM Vehicle# 841

Ticket Date 07/16/2019
Payment Type Credit Account Container

Manual Ticket# Driver Route Check#

Hauling Ticket# Billing# 0004473 Destination Grid 3F6-1575

Lot in chief

Manifest NY19-074

Profile 120805NY(NON FRIABLE ASBESTOS) Generator 1854272 190-USARMYCORPSEASTAURORA PO# 1) NY19-074 2) NY19-074

| | Time | | Scale | Operator | Inbound | Gross | 10260 | lb |
|-----|----------|----------|------------|----------|---------|-------|-------|-----|
| In | 07/16/19 | 08:49:04 | A INBOUND | JChapma7 | | Tare | 9740 | lb |
| Out | 07/16/19 | 09:06:42 | A OUTBOUND | JChapma7 | | Net | 520 | lb |
| | | | | | | Tons | | .26 |

601 WILLARDSHIRE RD

| Prod | luct | LD% | Qty | UOM | Rate | Tax/Fee | Amount Origin |
|------|-------------------------|-----|-----|------|------|---------|---------------|
| 1 | Asb Non Fri-Tons-Asbest | 100 | .26 | Tons | | | ERI |
| 2 | RCR-P-Regulatory Cost R | 100 | | % | | | ERI |

Total Tax/Fees Total Ticket

Driver's Signature